Case 18	3-13719-mdc	Doc 16		Entered 06/29/18 13:46:20 Page 1 of 5	Desc Main
FiltoOffsto	formation to identify	your case:			
Debtor 1	STEPHANIE JAMES		opping and the state of the sta		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Eastern District of	of Pennsylvania		
Case number (If known)	18-13719	· · · · ·			Check if this is an amended filing
				······································	
Official F	orm 106E/F	_			
Schedu	ile E/F: Cre	ditors	Who Have U	nsecured Claims	12/15
List the other A/B: Property creditors with needed, copy	party to any executo (Official Form 106A/i partially secured cla	ry contracts o B) and on Sch ims that are li Il it out, numbe	r unexpired leases that edule G: Executory Con sted in Schedule D: Cre er the entries in the box	PRIORITY claims and Part 2 for creditors wit could result in a claim. Also list executory stracts and Unexpired Leases (Official Form ditors Who Have Claims Secured by Properes on the left, Attach the Continuation Page	contracts on <i>Schedule</i> 196G). Do not include any ty. If more space is
Kafi-Yi Lis	t All of Your PRIO	RITY Unsec	ured Claims	and the second s	etz DCPSWATO SCHWEG ELECTROWNECHWATCHSCHLOCH ACTOR HISTORICA STRANGENSTURIN WERENESSER, MA WERNERGISTER TO THE
1. Do any cre No. Go Yes.	ditors have priority t to Part 2.	unsecured clai	ms against you?		

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Nonpriority Total claim amount 2.1 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one.

Debtor 1 only Disputed Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other, Specify Is the claim subject to offset? □ No 2.2 Last 4 digits of account number When was the debt incurred? Priority Creditor's Name As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated ZIP Code Disputed Who incurred the debt? Check one.

Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other, Specify Is the claim subject to offset? ___ No Yes

Case 18-13719-mdc Doc 16 Filed 06/29/18 Entered 06/29/18 13:46:20 Desc Main Page 2 of 5 Case number (# #nown) 18-13719

STEPHANIE JAMES

Middle Name

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List All of Your NONPRIORITY Unsecured Claims

		Market Committee work of Control	***		manuscless three translations of the contract	TENNESS CONTRACTOR DE LA CONTRACTOR DE CONTR
3.	Do any creditors have nonpriority un No. You have nothing to report in the Yes					
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one cre- claims fill out the Continuation Page of	ditor sepa ditor holds	rately for each claim	. For each claim listed, identify what	at type of claim it is. Do not	list claims already
	CONVERGENT CITIZENS BANK					Total claim
1.1				Last 4 digits of account number	9512	_{\$} 6,613.48
	Nonpriority Creditor's Name			When was the debt incurred?		\$ 0,010.40
	800 SW 39TH ST Number Street					
	P O BOX 9004			As of the date you file, the claim	is: Check all that apply.	
	RENTON	WA	98057-9004	✓ Contingent		
	City	State	ZIP Code	☑ Unliquidated		
	Who incurred the debt? Check one.			Disputed		
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another			Obligations arising out of a separathat you did not report as priority		
	Check if this claim is for a commun	nity debt		Debts to pension or profit-sharing Other. Specify Credit Card Deb	plans, and other similar debts	
	is the claim subject to offset?			Other, Specify Credit Card Deb		
-	V No					
2	DIRECTV		TO BROKEN BY THE STREET THE BEST THOUSE OF THE THREW IN	Last 4 digits of account number	6843	_{\$} 363,85
<u>.</u>					01/14/2018	-
	Nonpriority Creditor's Name RPM, LLC					
	Number Street POST OFFICE BOX 1548			As of the date you file, the claim	is: Check all that apply.	
	Lynnwood	WA	98036	Contingent		
	City	State	ZIP Code	Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only			Disputed Type of NONPRIORITY unsecu	rad alaim:	
	Debtor 2 only			Student loans	rea clann.	
	Debtor 1 and Debtor 2 only			Obligations arising out of a separa	ation agreement or divorce	
	At least one of the debtors and another			that you did not report as priority	claims	
	☐ Check if this claim is for a commun	nity debt		Debts to pension or profit-sharing Other. Specify	plans, and other similar debts	
	Is the claim subject to offset?			Other, Specify		
	No No					
.3	Farmers Insurance	ESSELENCELES CALIFORNIA PLIA			1078	reconnect one of the postern to deposit on a new Wig
				Last 4 digits of account number		\$ <u>500.00</u>
	Nonpriority Creditor's Name		· 	When was the debt incurred?	10/20/2017	
	Payment Processing Center Number Street					
	Post Office Box 0991			As of the date you file, the claim	is: Check all that apply.	
	Carol Stream	IL State	60132-0991 ZIP Code	Contingent		
	Who incurred the debt? Check one.			✓ Unliquidated✓ Disputed		
	Debtor 1 only			Type of NONPRIORITY unsecu	red claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only			Student loans	, = = 4100111	
	At least one of the debtors and another			Obligations arising out of a separa	ation agreement or divorce	
	Check if this claim is for a commun	ity debt	7.000001	that you did not report as priority to Debts to pension or profit-sharing	plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify Canceled Auto I	nsurance	
	No No					
	Yes					

18-13719 Case number (# xnown)____

STEPHANIE JAMES

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Page 3 of 5

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First Name Middle Name

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List All of Your NONPRIORITY Unsecured Claims

3,	3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes							
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one cre claims fill out the Continuation Page of	ditor sepa ditor holds	rately for each claim	n. For each claim listed, identify wha	at type of claim it is. Do not	list claims already		
						Total claim		
1,4	PECO			Last 4 digits of account number	1006	125.00		
	Nonpriority Creditor's Name 2301 MARKET STREET				12/06/2017	<u>\$ 135.00</u>		
	Number Street							
	P O BOX 13778			As of the date you file, the claim	is: Check all that apply.			
	PHILADELPHIA	PA	19101-3778	✓ Contingent				
	City	State	ZIP Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only			☑ Disputed				
	Debtor 2 only			Type of NONPRIORITY unsecu	red claim:			
	Debtor 1 and Debtor 2 only			Student loans				
	At least one of the debtors and another			Obligations arising out of a separathat you did not report as priority				
	Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing Other. Specify Utility Services	plans, and other similar debts			
	Is the claim subject to offset?			Other, Specify Other Col viole				
	No No							
1	L_I Yes PHILA GAS WORKS		en kurur o poloko poloko oblaziona destantelinas seuro	NIDANIMENI II MOMINEIS MAETS IMEEN MARAIL PARAIL IN 1804 VIRTU INTERNISSE MITTERNISSE MITTERNISSE MITTERNISSE M		600.00		
1.5	PHILA GAS WORKS			Last 4 digits of account number		\$600.00		
	Nonpriority Creditor's Name			When was the debt incurred?	<u>12/13/2017</u>			
	P O BOX 3500							
	Number Street	***************************************		As of the date you file, the claim	is: Check all that apply.			
	PHILADELPHIA	PA	19122-0500	☑ Contingent				
	City	State	ZIP Code	Untiquidated				
	Who incurred the debt? Check one. Debtor 1 only			☑ Disputed				
	Debtor 2 only			Type of NONPRIORITY unsecu	red claim:			
	Debtor 1 and Debtor 2 only			Student loans				
	At least one of the debtors and another			Obligations arising out of a separa				
	Check if this claim is for a commu	nitv deht		that you did not report as priority of Debts to pension or profit-sharing				
		,		☑ Other Specify Utility Services				
	Is the claim subject to offset?							
	Yes	P P 1 1 2 2 1 1 1 2 2 2 2 2 2 2 2 2 2 2			CONTROL OF THE PROPERTY OF THE	Own and the second of the seco		
.6	VERIZON			Last 4 digits of account number	0180	\$0.00		
	Nonpriority Creditor's Name				01/01/2018	Ψ <u>2</u>		
	P O BOX 4842			·	····			
	Number Street							
	TOTALTON		00000 1010	As of the date you file, the claim	is: Check all that apply.			
	TRENTON	NJ State	08650-4842 ZIP Code	Contingent				
	Who incurred the debt? Check one.		En Odde	Unliquidated				
	Debtor 1 only			☑ Disputed				
	Debtor 2 only			Type of NONPRIORITY unsecu	red claim:			
	Debtor 1 and Debtor 2 only			Student loans				
	At least one of the debtors and another			Obligations arising out of a separathat you did not report as priority of				
	Check if this claim is for a commun	nity debt		Debts to pension or profit-sharing	ntens, and other similar debts.			
	Is the claim subject to offset?			Other Specify Telephone / Inte	Stilet GOLFIGGS			
	☑ No							
	Yes							

Case 18-13719-mdc Doc 16 Filed 06/29/18 Entered 06/29/18 13:46:20 Desc Main 18-13719 Case number (# xnown)____

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STEPHANIE JAMES

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Page 4 of 5

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First Name Middle Name

Last Name

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List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes							
	nonpriority unsecured claim, list the cred	itor sepai itor holds	rately for each clain	order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no	list claims already			
	1				Total claim			
.7	WATER REVENUE BUREAU			Last 4 digits of account number 5001	s 150,00			
	Nonpriority Creditor's Name MSB BLDG			When was the debt incurred?	\$			
	Number Street 1401 JFK BLVD							
				As of the date you file, the claim is: Check all that apply.				
		PA	19102-1663	✓ Contingent				
	·	State	ZIP Code	☑ Unliquidated				
	Who incurred the debt? Check one.			☑ Disputed				
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	Debtor 2 only Debtor 1 and Debtor 2 only			☐ Student loans				
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce				
				that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	Check if this claim is for a communi	ity debt		Other. Specify Utility Services				
	Is the claim subject to offset?			and outer speedy				
.8	WORLD FINANCIAL NETWORK BANI	K	P PARPARA COLUMN PROGRAM DE SELECTION DE SONOTAN CARRO	Last 4 digits of account number 2276	\$ 600.00			
	Nonpriority Creditor's Name			When was the debt incurred? 03/09/2018				
	PORTFOLIO RECOVERY ASSOC, LL	С						
	Number Street P O BOX 12914			As of the date you file, the claim is: Check all that apply.				
		VA	00544	✓ Contingent	1			
		VA Stale	ZIP Code	☑ Unliquidated				
	Who incurred the debt? Check one.			✓ Disputed				
	Debtor 1 only			Type of NONPRIORITY unsecured claim:				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Student loans				
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce				
				that you did not report as priority claims				
	Check if this claim is for a communi	ty debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card Debt				
	Is the claim subject to offset?							
	No Yes							
	The state of the s			Last 4 digits of account number	•			
	Nonpriority Creditor's Name			When was the debt incurred?	Ψ			
	Number Street				To the second se			
	- CHARLES OF COLUMN COL			As of the date you file, the claim is: Check all that apply.				
				Contingent				
	Who incurred the debt? Check one.	tate	ZIP Code	Unliquidated				
	Debtor 1 only			☐ Disputed				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only			Student loans				
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce				
	Check if this claim is for a communit	ty debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?			Other. Specify				
	□ No			• •				
	Yes							
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Filed 06/29/18 Entered 06/29/18 13:46:20 Desc Main Case 18-13719-mdc Doc 16

Debtor 1

STEPHANIE JAMES

Middle Name

First Name

Document

Page 5 of 5

Case number (# known) 18-13719

Add the Amounts for Each Type of Unsecured Claim

Last Name

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e. Totał. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	s	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ §	8,962,33
	6j. Total. Add lines 6f through 6i.	6j.	S	8,962.33